

Section IV
INTER-ISLAND REFERRALS

1. 177 Health Care Program enrolled patients may be referred from the outer atolls if they meet the following criteria:
 - a. The patient is enrolled in the program and,
 - b. The referring physician believes the illness cannot be treated on the atoll, or
 - c. A needed diagnostic or special procedure cannot be provided on the atoll.
2. Health assistants must call the 177 Health Care Program Majuro office and consult with a 177 Health Care Program physician if available or call the Outer Island Dispensary System physician on duty. The physician will decide if a referral is recommended. The 177 Health Care Program administration must approve the referral before the patient's departure for Majuro or Ebeye. Patients coming without prior approval will not receive any 177 Health Care Program reimbursement or stipend unless admitted to the hospital on arrival. Referrals for elective or non-emergency procedures will be scheduled to coincide with bed, doctor or facility availability.
3. Upon arrival at Majuro or Ebeye the patient and escort if authorized will be provided transportation to the hospital, 177 Health Care Program office for registration, or to a temporary residence if the arrival is after business hours. Patients and escorts must register at the 177 Health Care Program office upon arrival, or in the morning of the next business day if their arrival is after hours or on weekends. Eligibility for supplemental living stipend will begin not earlier than the day of arrival or business day before the day of registration whichever is later.
4. The following conditions cannot be referred to Majuro or Ebeye hospital from the outer atolls:
 - a. Eye refractions, or measuring the eyes for glasses. This service is provided by the visiting optometrist when available..
 - b. Dental checks, tooth extractions, or teeth cleaning. These services will be provided by the visiting dentist when available.
5. As part of secondary care services, if a 177 Health Care Program patient does not survive during a referral visit, the remains will be returned to the originating atoll. Remains will be embalmed if desired by the family, and a casket will be provided. A family escort will be authorized transportation to accompany the remains.
6. Referrals are subject to funding availability, and can be suspended if funds are depleted before the end of the current quarter. Suspension will be based on current financial reports, and projection of current referral costs. Exceptions to suspension may be authorized based on the urgency of the case.

8. If a 177 Health Care Program patient is referred under the Marshall Islands Social Security Program Basic Health Plan while the 177 Health Care Program tertiary care program is open, the 177 Health Care Program will reimburse the Marshall Islands Social Security Program for the costs incurred.

9. If the U.S. Department of Energy (DOE) refers patients to Honolulu and additional medical care not covered by DOE is advised, DOE will notify the 177 Health Care Program. A 177 Health Care Program physician will present the recommendations to the National Medical Referral Committee who will consider if off island treatment should be used. If approved, the 177 Health Care Program will coordinate the additional treatment with DOE.

10. Patients referred under other insurance or medical plans are not eligible for off island medical referral benefits for the same period or condition under the 177 Health Care Program.

11. As part of tertiary care services, if a 177 Health Care Program patient does not survive during a referral visit, the remains will be returned to the originating atoll. Remains will be embalmed if desired by the family, and a casket will be provided. A family escort will be authorized transportation to accompany the remains.

12. Referrals are subject to funding availability, and can be suspended if funds are depleted before the end of the current quarter. Suspension will be based on current financial reports, and projection of current referral costs. Exceptions to suspension may be authorized based on the urgency of the case.

13. Patients and authorized escorts will be picked up at the Honolulu International Airport by the 177 Health Care Program Honolulu staff and transported to their accommodations or medical facility.

14. The 177 Health Care Program staff will arrange for suitable accommodation.

15. The 177 Health Care Program staff will provide transportation for patients and escorts to and from the hospital, and medical appointments. The staff will not provide transportation for shopping (unless medically indicated) and other private errands.

16. Patients and escorts must cooperate fully with hospital and 177 Health Care Program staff. Patients who refuse treatment, or do not follow the doctor's order, or who miss two appointments for treatment will be returned to the Marshall Islands, and will be ineligible for further off-island medical treatment for the same condition.

17. Patients and/or escorts are responsible for any damage that they cause in their housing, the hospital and any other place during the referral. Damage costs will be deducted from supplemental living stipend payments.

Section VIII
SUPPLEMENTAL LIVING SUPPORT

1. Supplemental Living Stipend is provided by the 177 Health Care Program to patients and their authorized escorts when referred by 177 Health Care Program to Majuro, or Ebeye or Honolulu for medical care. Supplemental Living Stipend is not a form of compensation, nor is it intended to pay for all patient and escort expenses that may arise. The sole purpose of Supplemental Living Stipend is to help defray the cost of food and lodging during a referral.

2. The following schedule shows the daily rate of Supplemental Living Stipend for the patient and escort.

Majuro:	Adult	Child
Inpatient	\$3.00	\$3.00
Outpatient	\$15.00	\$7.00
Newborn Inpatient (First two weeks of life)		\$7.00

Ebeye:		
Inpatient	\$15.00	\$7.00
Outpatient	\$15.00	\$7.00
Newborn inpatient (First two weeks of life)		\$7.00

Honolulu:		
(Lodging is arranged and paid for by the 177 Health Care Program in Honolulu. Occupants are responsible for personal charges and damage to lodging facilities)		
Inpatient	None	None
Outpatient	\$15.00	\$15.00
Escort	\$15.00	\$15.00

3. The child rate is paid to patients 11 years old and younger. Children and adults receive the same rate in Honolulu.

4. Supplemental Living Stipend must be claimed during the period of medical service. Retroactive payments are not made.

5. Supplemental Living Stipend will be provided weekly. Outpatients require a weekly progress report signed by the attending physician saying that the patient is following all required treatment. Patients or escorts may claim the Supplemental Living Stipend payments by signing the payment request and showing their 177 Health Care Program enrollment card.

6. Supplemental Living Stipend will end once the patient has been medically cleared to return to their home atoll and transportation is made available.

Section XII
EXCLUDED MEDICAL CONDITIONS AND SERVICES

1. The following medical conditions excluded from off-island referral under the 177 Health Care Program.

- a. Acquired immune deficiency (AIDS), HIV infections, and related conditions.
- b. Alcohol and drug dependence services.
- c. Any cancer cases that only require palliative treatment
- d. All cases which can be handled at the local hospital
- e. Hydrocephalic cases previously referred and treated but with abnormal motor or mental development.
- f. Any cases with a five year survival rate of less than 50% based on current medical statistics and experience in the Republic.
- g. Amyotrophic lateral sclerosis, tuberculosis, and Hansen's disease, except cases where the medical referral committee determines that the patient can be appropriately treated outside the Republic and the patient has complied with prescribed treatment administered within the Republic.
- h. Congenital defects or abnormalities, except cases where the medical referral committee determines the patient's quality of life and the longevity can be significantly increased by treatment outside the Republic.
- i. Custodial, domiciliary, or convalescent care.
- j. Dental services except for surgical procedures as a result of accidental injury to natural teeth or jaw.
- k. Experimental or investigative services
- l. Eye refraction for glasses, eyeglasses, eye exercises, contact lenses and/or fittings and refractive surgery to correct vision problems.
- m. Diabetic retinopathy
- n. Hemodialysis for renal failure secondary to diabetes mellitus and all services related thereto.
- o. Cosmetic services, except in such cases relating to accidental injury or resulting from other surgery where the medical referral committee determines that severe emotional and psychological damage can be avoided only by such treatment outside the Republic.
- p. Long term physical therapy and rehabilitative services and physical therapy and rehabilitative services that can be provided in the Republic.
- q. Mental retardation and non-correctable mental deficiency.
- r. Organ transplants
- s. Procedures not generally and customarily available.
- t. Services not medically necessary, including interrupted pregnancy, reversal of sterilization, fertilization by artificial means, and services related to sex transformations or sexual dysfunction or inadequacies.
- u. Temporomandibular joint disorders and related diseases.



EMBASSY OF THE REPUBLIC OF THE MARSHALL ISLANDS
2433 Massachusetts Ave., Washington D.C. 20008 Telephone: (202) 234-5414 FAX: (202) 232-3236

To: TOM BELL

FAX Number:

From: HOLLY BARKER

Subject: 177 REFERRAL POLICY (as discussed)

Comments:

Date:

Time:

No. of Pages: including this cover page.

Contact at (202) 234-5414 if there are any problems with this transmission.

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